



August 12, 2010

TO: SUD Medicaid Specialty Network

FROM: Business Psychology Associates

RE: Medicaid Client Eligibility and Claims Reimbursement

As a SUD Medicaid Specialty Network provider and in accordance with your SUD Medicaid Contract Addendum, it is your responsibility to conduct Medicaid eligibility checks for all clients covered under a Medicaid benefit plan. To protect you from providing services for which you will not be reimbursed it is imperative that your agency track and confirm eligibility for all services provided to a Medicaid eligible client.

If a client does not meet eligibility, you are required to notify BPA immediately as outlined below:

- Upon determining Medicaid ineligibility of a Medicaid funded client, you are required to complete and submit a financial eligibility form to BPA
- Upon receipt of a financial eligibility form indicating ineligibility for Medicaid, BPA ends all Medicaid Plan benefits and distributes the closed authorization voucher to the provider
- Clients eligible for other funding sources under a dual plan benefit will be reviewed for continued eligibility under the designated funding source. If the client continues to be eligible for services, a new authorization will be created and distributed to the provider

BPA will recoup claims paid for ineligible Medicaid clients from your future claims remits. Claims reimbursed for ineligible Medicaid clients with a dual benefit plan may be reprocessed against the second plan benefit.

Questions regarding client eligibility, plan benefits and submission of financial eligibility updates may be directed to the BPA Client Services Center staff at (800) 922-3406.

Thank you for your attention to these requirements.

BPA Operations Team